

DISTRICT I
P O. Box 1980, Hobbs, NM 88240

DISTRICT II
P O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-35345
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name Johnson Ranch State 28 Com
Well No. 1
Pool name or Wildcat Johnson Ranch; Wolfcamp

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
Type of Well: OIL <input type="checkbox"/> WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	
Name of Operator Nearburg Producing Company	Well No. 1
Address of Operator 3300 N A St., Bldg 2, Suite 120, Midland, TX 79705	Pool name or Wildcat Johnson Ranch; Wolfcamp
Well Location Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>28</u> Township <u>24S</u> Range <u>33E</u> NMPM <u>Lea</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3521' GR	

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Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Long String casing and cement ☒

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

06/12/01: Drilled 6-1/8" hole to 12,600'. C&C hole. RU and ran 294 jts 7", 23#, 26# & 29#, S-95, L80, P-110, LT&C & BT&C casing to 12,600'. Cement casing using 350 sx 50/50 "H" + additives. Run Temp Survey -TOC @ 11,000'. ND BOPE, set slips, cut csg and NU "B" section well head. NUBOPE and test.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kim Stewart TITLE Regulatory Analyst DATE 06-15-01
TYPE OR PRINT NAME Kim Stewart TELEPHONE NO. 915/686-8235

(This space for State Use)

APPROVED BY _____ TITLE Paul Kautz DATE 6/15/01
Geologist
CONDITIONS OF APPROVAL, IF ANY: